



MISSOURI DEPARTMENT OF NATURAL RESOURCES
GEOLOGICAL SURVEY AND RESOURCE ASSESSMENT DIVISION
GEOLOGICAL SURVEY PROGRAM
**REQUEST FOR PRELIMINARY INVESTIGATION OF AREA
PROPOSED FOR BENEFICIAL REUSE OF SOLID WASTE**

FOR OFFICE USE ONLY

PROJECT ID #

DATE RECEIVED

FACILITY OR PROJECT LOCATION

FACILITY OR PROJECT NAME

¼ ¼ SECTION	¼ SECTION	¼ SECTION	SECTION	TOWNSHIP N.	RANGE E/W	QUADRANGLE NAME
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WRITTEN LOCATION IF LEGAL DESCRIPTION IS UNAVAILABLE

COUNTY

OWNER INFORMATION

OWNER'S NAME

TELEPHONE

ADDRESS

CITY

STATE

ZIP CODE

EVALUATION REQUESTED BY

NAME AND COMPANY OF REQUESTOR

TELEPHONE

ADDRESS

CITY

STATE

ZIP CODE

FACILITY INFORMATION

TYPE OF MATERIAL(S) PROPOSED

ESTIMATED THICKNESS AND QUANTITY OF
MATERIALS TO BE PLACED

ESTIMATED SIZE OF BENEFICIAL REUSE AREA
IN ACRES

SKETCH OR MAP MUST BE SUBMITTED WITH REQUEST!

A sketch map or photocopy of topographic map must contain the following: all known wells, springs, sinkholes, caves, mines, roads, and dwellings within ¼ mile of the facility. Show the estimated boundaries of the beneficial reuse area and any existing borings, test pits, or excavations which expose soil or bedrock. Include a scale and north arrow on the sketch map.

GENERAL DESCRIPTION OF PROPOSED ACTIVITY AND OTHER COMMENTS

REQUESTOR'S SIGNATURE

DATE

OWNER'S SIGNATURE (INDICATES PERMISSION TO ACCESS PROPERTY)

DATE